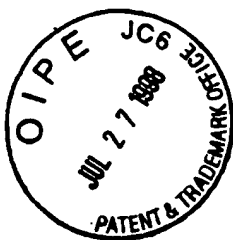


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Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	BT-4522
	First Named Inventor	John G. Atwood
	COMPLETE IF KNOWN	
	Application Number	09 / 075,392
	Filing Date	05/08/98
	Group Art Unit	
Examiner Name		

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

IMPROVEMENTS IN THERMAL CYCLER FOR PCR

the specification of which
☐ is attached hereto
 OR
☒ was filed on (MM/DD/YYYY) **05/08/98** as United States Application Number or PCT International Application Number **09/075,392** and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/041,754	03/28/97	
60/046,122	05/09/97	

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
PCT/US 98/ 06189	03/30/98	

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number OR
☐ Registered practitioner(s) name/registration number listed below

Place Customer
Number Bar Code
Label here

Name	Registration Number	Name	Registration Number
David Aker	29,277		
Richard J. Bartlett	31,322		

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☐ Customer Number OR ☒ Correspondence address below

Name	David Aker				
Address	The Perkin-Elmer Corporation				
Address	761 Main Avenue				
City	Norwalk	State	CT	ZIP	06859-0199
Country	USA	Telephone	203-761-5123	Fax	203-761-2888

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Family Name or Surname			
John G.		Atwood			
Inventor's Signature				Date	7/14/98
Residence: City	West Redding	State	CT	Country	USA
Post Office Address	149 Limekiln Road				
Post Office Address					
City	West Redding	State	CT	ZIP	06896
		Country	USA		

☒ Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto



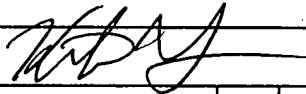
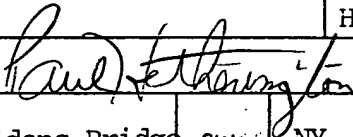
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PTO/SB/02A (3-97)
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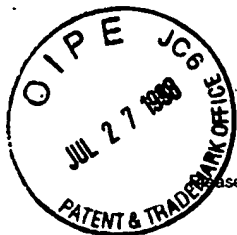
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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 3 of 5

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle (if any))				Family Name or Surname				
Adrian				Fawcett				
Inventor's Signature				Date				
Residence: City		Pleasanton	State	CA	Country	USA	Citizenship	UK
Post Office Address		3606 W. Las Positas Boulevard						
Post Office Address								
City		Pleasanton	State	CA	ZIP	94588	Country	USA
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle (if any))				Family Name or Surname				
Keith S.				Ferrara				
Inventor's Signature				Date		7-9-98		
Residence: City		Stratford	State	CT	Country	USA	Citizenship	USA
Post Office Address		383 Woodstock Avenue						
Post Office Address								
City		Stratford	State	CT	ZIP	06497	Country	USA
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle (if any))				Family Name or Surname				
Paul M.				Hetherington				
Inventor's Signature				Date				
Residence: City		Goldens Bridge	State	NY	Country	USA	Citizenship	USA
Post Office Address		#103 - 10 Wild Oaks Road						
Post Office Address								
City		Goldens Bridge	State	NY	ZIP	10526	Country	USA

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 4 of 5

Name of Additional Joint Inventor, If any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Richard W.				Noreiks			
Inventor's Signature		<i>Richard W. Noreiks</i>		Date		7/9/98	
Residence: City		Stratford		State		CT	
		Country		USA		Citizenship	
		USA					
Post Office Address		5300 Main Street					
Post Office Address							
City		Stratford		State		CT	
		ZIP		06614		Country	
		USA					
Name of Additional Joint Inventor, If any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Douglas E.				Olsen			
Inventor's Signature		<i>Douglas E. Olsen</i>		Date		7/9/98	
Residence: City		New Fairfield		State		CT	
		Country		USA		Citizenship	
		USA					
Post Office Address		30 Lake Drive South RR3					
Post Office Address							
City		New Fairfield		State		CT	
		ZIP		06812		Country	
		USA					
Name of Additional Joint Inventor, If any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
John R.				Widomski			
Inventor's Signature		<i>John R. Widomski</i>		Date		07/17/98	
Residence: City		Shelton		State		CT	
		Country		USA		Citizenship	
		USA					
Post Office Address		10 Serene Drive					
Post Office Address							
City		Shelton		State		CT	
		ZIP		06484		Country	
		USA					

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>5</u> of <u>5</u>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Charles M.				Wittmer			
Inventor's Signature	<i>Charles M Wittmer</i>					Date	<i>July 9, 1998</i>
Residence: City	Trumbull	State	CT	Country	USA	Citizenship	USA
Post Office Address	15 Clarion Place						
Post Office Address							
City	Trumbull	State	CT	ZIP	06611	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	

+

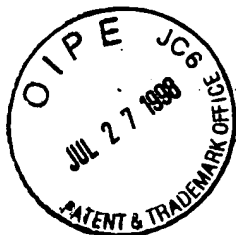
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203 761 2888 TO 8 5007

P.02/10

#3

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

☐ Declaration Submitted with Initial Filing

OR

☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	BT-4522
First Named Inventor	John G. Atwood
COMPLETE IF KNOWN	
Application Number	09 / 075,392
Filing Date	05/08/98
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

IMPROVEMENTS IN THERMAL CYCLER FOR PCR

the specification of which (Title of the invention)

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 05/08/98 as United States Application Number or PCT International

Application Number 09/075,392 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)
60/041,754	03/28/97
60/046,122	05/09/97

☐ Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

(Page 1 of 2)

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203 761 2888 TO 6007

P.03/10

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 35(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
PCT/US 98/ 06189	03/30/98	

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number

OR

☐ Registered practitioner(s) name/registration number listed below

 Place Customer
 Number Bar Code
 Label here

Name	Registration Number	Name	Registration Number
David Aker	29,277		
Richard J. Bartlett	31,322		

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

 Direct all correspondence to: ☐ Customer Number or Bar Code Label
OR ☒ Correspondence address below

Name	David Aker				
Address	The Perkin-Elmer Corporation				
Address	761 Main Avenue				
City	Norwalk	State	CT	ZIP	06859-0199
Country	USA	Telephone	203-761-5123	Fax	203-761-2888

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

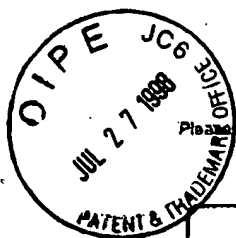
Given Name (first and middle (if any))		Family Name or Surname	
John G.		Atwood	
Inventor's Signature			Date 7/14/98
Residence: City	West Redding	State	CT
		Country	USA
Post Office Address	149 Limekiln Road		
Post Office Address			
City	West Redding	State	CT
		ZIP	06896
		Country	USA

☒ Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

JUL 16 '98 10:32 FR PER ELMER

203 761 2888 TO 8 5007

P.04/10

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DECLARATION

ADDITIONAL INVENTOR(S)
 Supplemental Sheet
 Page 3 of 5

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Adrian				Fawcett			
Inventor's Signature						Date	7/16/98
Residence: City	Pleasanton	State	CA	Country	USA	Citizenship	UK
Post Office Address 3606 W. Las Positas Boulevard							
Post Office Address							
City	Pleasanton	State	CA	ZIP	94588	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Keith S.				Ferrara			
Inventor's Signature						Date	7-9-98
Residence: City	Stratford	State	CT	Country	USA	Citizenship	USA
Post Office Address 383 Woodstock Avenue							
Post Office Address							
City	Stratford	State	CT	ZIP	06497	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Paul M.				Hetherington			
Inventor's Signature						Date	
Residence: City	Goldens Bridge	State	NY	Country	USA	Citizenship	USA
Post Office Address #103 - 10 Wild Oaks Road							
Post Office Address							
City	Goldens Bridge	State	NY	ZIP	10526	Country	USA

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203 761 2888 TO 8 6007

P.05/10

Use type a plus sign (+) inside this box → ☐

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 4 of 5

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Richard W.				Noreiks			
Inventor's Signature	<i>Richard W. Noreiks</i>					Date	7/9/98
Residence: City	Stratford	State	CT	Country	USA	Citizenship	USA
Post Office Address	5300 Main Street						
Post Office Address							
City	Stratford	State	CT	ZIP	06614	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Douglas E.				Olsen			
Inventor's Signature	<i>Douglas E. Olsen</i>					Date	7/9/98
Residence: City	New Fairfield	State	CT	Country	USA	Citizenship	USA
Post Office Address	30 Lake Drive South RR3						
Post Office Address							
City	New Fairfield	State	CT	ZIP	06812	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
John R.				Widanski			
Inventor's Signature						Date	
Residence: City	Shelton	State	CT	Country	USA	Citizenship	USA
Post Office Address	10 Serene Drive						
Post Office Address							
City	Shelton	State	CT	ZIP	06484	Country	USA

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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203 761 2888 TO 06007

P.06/10

Type a plus sign (+) inside this box → ☐

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PTO/SB/02A (3-87)

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Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

DECLARATION**ADDITIONAL INVENTOR(S)
Supplemental Sheet**

Page 5 of 5

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))		Family Name or Surname			
Charles M.		Wittmer			
Inventor's Signature	Charles M Wittmer			Date	July 19 1998
Residence: City	Trumbull	State	CT	Country	USA
Post Office Address	15 Clarion Place				
Post Office Address					
City	Trumbull	State	CT	ZIP	06611
				Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))		Family Name or Surname			
Inventor's Signature				Date	
Residence: City		State		Country	
Post Office Address					
Post Office Address					
City		State		ZIP	
				Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))		Family Name or Surname			
Inventor's Signature				Date	
Residence: City		State		Country	
Post Office Address					
Post Office Address					
City		State		ZIP	
				Country	

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